



221 N 10<sup>th</sup> Street  
McAllen, TX 78501  
Phone: 956-631-0205  
Fax: 956-630-2628

2604 International Blvd  
Brownsville, TX 78521  
Phone: 956-504-9354  
Fax: 956-504-9873

\*Please fill out to update  
our records.

**CUSTOMER PROFILE**

*Please fill out and return to us*

COMPANY NAME: \_\_\_\_\_

DBA's: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

WEB ADDRESS: \_\_\_\_\_

(Please enclose extra sheet for additional locations.)

TAX EXEMPT?  YES-Please attach Tax Exemption Certificate  NO

TYPE OF BUSINESS: Automotive Business Services Communications Construction & Design  
Education Financial & Real Estate Government Agency Healthcare Hospitality Import & Export  
Insurance Legal Manufacturers Non-Profit Religious Organization Retail Services  
OTHER \_\_\_\_\_

YEAR STARTED: \_\_\_\_\_

TYPE OF ORGANIZATION:  CORPORATION  PROPRIETOR  LLC  PARTNERSHIP

FEDERAL TAX ID#: \_\_\_\_\_

*Name/Title*

*E-mail*

*Phone & Extension*

DECISION MAKER: \_\_\_\_\_

ACCOUNTS PAYABLE : \_\_\_\_\_

DO YOU PREFER YOUR INVOICES:  MAILED  FAXED  EMAILED \_\_\_\_\_

EQUIPMENT OPERATOR: \_\_\_\_\_

IN APPLYING FOR CREDIT, THE CUSTOMER AGREES TO PAY ALL INVOICES WITHIN 30 DAYS FROM DATE OF INVOICE AND TO PAY A SERVICE CHARGE OF 1 ½ % PER MONTH, WHICH IS AN ANNUAL PERCENTAGE RATE OF 18% ON ALL OVERDUE BALANCES. IN THE EVENT A SUIT IS NECESSARY TO COLLECT ANY AMOUNT, THE CUSTOMER AGREES TO PAY THE SELLER'S REASONABLE ATTORNEY FEES AND COSTS INCLUDING ATTORNEY'S FEES FOR APPEAL.

SIGNATURE:

TITLE:

DATE:

SIGN HERE